Saint Vincent Family Medicine Center

2314 Sassafras Street Suite 200 Erie, PA 16502

814-454-4484 Fax: 814-452-1809

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December 1, 2005
Page 2
Chart Document

JOHN P LEONARDOS, SR

Male DOB:01/30/1940

1037665

Home: (814)455-3825 Office: 459-0606

Filed 12/02/2005

Ins: MEDICARE (81)

Risk Factors

Year quit smoking: 2000 working on smoking cesation

Vital Signs

T: 96.8 deg F. T site: tympanic BP: 188/90 repeat 154/82

Physical Examination

Constitutional: Alert, no acute distress, well hydrated.

Skin: no rashes.

Neck: no thyroid tenderness or nodules, no carotid bruits. **Cardiovascular:** RRR, no murmurs, peripheral pulses intact.

Respiratory: No respiratory distress, no accessory muscle use, clear to auscultation.

Abdomen: soft, no hepatosplenomegaly.

Extremities: LEFT KNEE: Warm and swollen he wants drained, se and risks reviewed

PROCEDURE: under sterile conditions aspiriated 30 cc straw colored fluid

medial space and injected 40 cc Kenalog

dressed, care reveiwed

Neurol: motor intact, station & gait normal. Psych: normal interaction, good eye contact.

Assessment

Status of Existing Problems:

CVA WITH RIGHT HEMIPARESIS Improved - Mark Masteller DO
HYPERTENSION, BENIGN ESSENTIAL Deteriorated - Mark Masteller DO
HYPERLIPIDEMIA, MIXED Unchanged - Mark Masteller DO
DISORDER, TOBACCO USE Unchanged - Mark Masteller DO
DIABETES MELLITUS Unchanged - Mark Masteller DO
History of GOUT NOS Deteriorated - Mark Masteller DO
History of CA IN SITU, BLADDER Improved - Mark Masteller DO
RENAL COLIC Improved - Mark Masteller DO
RENAL INSUFFICIENCY Improved - Mark Masteller DO

Impressions: LEF TKNEE Gouty arthritis

drained and injected stoerid continue colchicine as able

when better restart allopurinol, but cross over while on cholchicine for a week or two would like to avoid nsiads w DM / HTN

HTN no t well controlled just restarted lisinopril INC this to 40 mg a day to better control CLOSE FOLLOW UP needed call i home BP ove 160 Case 1:04-cr-00015-MBC Document 15-2

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12/01/2005 - Office Visit Provider: Mark Masteller DO

Location of Care: Saint Vincent Family Medicine Center

Office Visit

Allergies

No Known Allergies

History of Present Illness

History of Present Illness: Kne pain very bad yesterday tood colchicine q 2 hours until D pain vesterday 10/10 today 7/10

still swollen

labs reviewed

Cr good Hga1c 7
restarting Meformin and Lisinopril

will tritirate lisinopril UP w elve BP still

he has a history of Stroke and Blood Pressure elevated now and not well controlled he does require contined close monitoring and medication titration health is in Jeaopardy at this point

he is suffering with a lot of gouty pai presently and suffering quite a bit ambulation difculty w left knee gouty arthritis, he is not amulating without a crutch right now do to pain he is exeperiencing

he has a histeroy of bladder cancer requiring monitoring w urologist on a regular basis

Past, Surgical, Family, and Social History

Past History: RHM:

Colononscopy 8/03

PSA 1.71 3/03 2

2./26 on

8/05 HYPERCHOLESTEROL

3/03: C 261, H 27, L-, T 1318

TOBACCO

Bladder carcioma in situ -Dulabond sees regularly

hx colon polyps - colorectal

CVA

Renal stones

Past Surgical History:

last hgA1c = 7.0 11/05

GOUT

Family History: F died 62 MI

M well at 92

Social History: tobacco

alcohol

Waterfront restraunt owner now out of business 12/6/05 for 9 mo fed prison

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may add clonidine PRN

DM

needs cleose follow up just restarted Metformin so will need repeat labs and creatine soon

with hx of stroke also veyr worried about BP Close OUTPT FOLLOW UP needed

Plan

Updated Medication List:

ALLOPURINOL TABS 300 MG (ALLOPURINOL) 1 po qd
LOPID 600 MG TAB (GEMFIBROZIL) 1 po bid ac
TENORETIC 100 100-25 MG TABS (ATENOLOL-CHLORTHALIDONE) 1 po daily
ASPIRIN 325 MG EC TAB (ASPIRIN) daily
COLCHICINE 0.6 MG TABS (COLCHICINE) 1 po q 2hours until diarrhea for gout
LISINOPRIL 10 MG TABS (LISINOPRIL) 1 po daily
METFORMIN HCL 500 MG TABS (METFORMIN HCL) 1 po bid
INDOMETHACIN 50 MG CAPS (INDOMETHACIN) 1 capsule po TID with food

this not e given to pt for attny do to go to federal prison 12/6 would suggest delay until medical problmes more stable

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Signed by Mark Masteller DO on 12/01/2005 at 4:05 PM

And